

From: Office OF Women's Health <owh@cdc.gov>

To:

Subject: March 2002 Women's Health Update from the CDC/ATSDR

Date: Fri, 29 Mar 2002 08:13:10 -0500

Save the Date!! CDC/ATSDR Women's Health Conference, October 7-9, 2002, Atlanta, Georgia.

What's new at the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR)? See below for women's health-related information. This service is provided by the CDC/ATSDR Office of Women's Health. To subscribe, unsubscribe, or change your email address, email us at [owh@cdc.gov](mailto:owh@cdc.gov).

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## ARTICLES, REPORTS AND OTHER DOCUMENTS

### 1. Surveillance for Asthma - United States, 1980-1999

This report presents national data regarding self-reported asthma prevalence, school and work days lost because of asthma, and asthma-associated activity limitations; asthma-associated outpatient visits, asthma-associated hospitalizations, and asthma-associated deaths; asthma-associated emergency department visits; and self-reported asthma episodes or attacks. Both 12-month prevalence (before 1997) and 12-month attack prevalence of asthma (since 1997) were higher among children aged 5-14 years, blacks compared with whites, and females. The demographic pattern in rates of office visits for asthma demonstrated higher rates among blacks, females, and children. For deaths, disparities persist, with higher mortality rates documented among blacks, women, and the elderly, along with regional differences. Asthma remains a key public health problem in the United States.

Text version - <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5101a1.htm>

PDF version - <http://www.cdc.gov/mmwr/PDF/ss/ss5101.pdf>

## 2. Updated Fact Sheet: HIV/AIDS Among US Women: Minority and Young Women at Continuing Risk

Between 1992 and 1999, the number of persons living with AIDS increased, as a result of the 1993 expanded AIDS case definition and, more recently, improved survival among those who have benefited from the new combination drug therapies. During that 7-year period, a growing proportion of persons living with AIDS were women, reflecting the ongoing shift in populations affected by the epidemic. In 1992, women accounted for 14% of adults/adolescents living with AIDS - by 1999, the proportion had grown to 20%.

<http://www.cdc.gov/hiv/pubs/facts/women.htm>

## 3. Updated Fact Sheet: HIV/AIDS Among African Americans

In the United States, the impact of HIV and AIDS in the African American community has been devastating. Through December 2000, CDC had received reports of 774,467 AIDS cases - of those, 292,522 cases occurred among African Americans. Representing only an estimated 12% of the total U.S. population, African Americans make up almost 38% of all AIDS cases reported in this country. Almost two-thirds (63%) of all women reported with AIDS were African American.

<http://www.cdc.gov/hiv/pubs/facts/afam.htm>

## 4. Updated Fact Sheet: HIV/AIDS Among Hispanics in the United States

The United States has a large and growing Hispanic population that is heavily affected by the HIV/AIDS epidemic. In 2000, Hispanics represented 13% of the U.S. population (including residents of Puerto Rico), but accounted for 19% of the total number of new U.S. AIDS cases reported that year (8,173 of 42,156 cases). Cumulatively, males account for the largest proportion (81%) of AIDS cases reported among Hispanics in the United States, although the proportion of cases among females is rising. Females represent 19% of cumulative AIDS cases among Hispanics, but account for 23% of cases reported in 2000 alone.

<http://www.cdc.gov/hiv/pubs/facts/hispanic.htm>

## 5. Safe Motherhood: Promoting Health for Women Before, During, and After Pregnancy - At A Glance 2002

This fact sheet focuses on complications in pregnancy, disparities, deaths, surveillance, state programs, and research. Approximately 6 million American women become pregnant each year, and more than 10,000 give birth each day. Safe motherhood begins before conception with proper nutrition and a healthy lifestyle. It continues with appropriate prenatal care, the prevention of complications when possible, and the early and effective treatment of any complications that do occur. The ideal result is a labor at term without unnecessary interventions, the delivery of a healthy infant, and a healthy

postpartum period in a positive environment that supports the physical and emotional needs of the woman, infant, and family.

Text version - [http://www.cdc.gov/nccdphp/drh/mh\\_ataglance.htm](http://www.cdc.gov/nccdphp/drh/mh_ataglance.htm)

PDF modified/tagged version (189KB) -

[http://www.cdc.gov/nccdphp/drh/pdf/safemotherhood/motherhood%202002\\_tagged.pdf](http://www.cdc.gov/nccdphp/drh/pdf/safemotherhood/motherhood%202002_tagged.pdf)

PDF version (158KB) -

<http://www.cdc.gov/nccdphp/drh/pdf/safemotherhood/motherhood%202002.pdf>

#### 6. WISEWOMAN - Well-Integrated Screening and Evaluation for Women Across the Nation

Check out the new WISEWOMAN Web site to get more information on this cardiovascular risk factor screening and lifestyle intervention demonstration program.

<http://www.cdc.gov/wisewoman/>

#### 7. CDC Awards Funds to Improve Monitoring of Birth Defects

A total of \$3.2 million is being awarded to 20 public health agencies by CDC to improve birth defects surveillance. The funding will enable public health programs to develop, implement, and/or expand community-based birth defects tracking systems and programs that work to prevent birth defects, and support activities to improve access to health services for children with birth defects. Each site will receive between \$100,000 and \$190,000.

Press Release - <http://www.cdc.gov/od/oc/media/pressrel/r020312.htm>

#### 8. The Burden of Chronic Diseases and Their Risk Factors: National and State Perspectives 2002

This document provides updated information on the prevalence of selected chronic diseases and their risk factors in the 50 states and the District of Columbia. The document is divided into five sections. The first section provides a national perspective on chronic diseases as major causes of death in the United States. In the second section, state-specific data on rates of death due to heart disease, cancer, stroke, and diabetes allow for easy state-by-state comparisons. The third section provides information on the prevalence of three major risk behaviors-tobacco use, lack of physical activity, and poor nutrition-and on the use of selected preventive services: mammography screening, sigmoidoscopy or colonoscopy, fecal occult blood test, and health care coverage. This section also includes information on the prevalence of overweight among adults and young people. The fourth section provides profiles of chronic diseases, risk factors, and selected preventive services in each state. The fifth section provides information on the prevalence of arthritis and other rheumatic conditions. View the information by disease and risk factor, or click on the map to view by state.

Text version - <http://www.cdc.gov/nccdphp/burdenbook2002/index.htm>

PDF version - [http://www.cdc.gov/nccdphp/burdenbook2002/Burden\\_Book\\_2000.pdf](http://www.cdc.gov/nccdphp/burdenbook2002/Burden_Book_2000.pdf)

#### 9. Variation in Homicide Risk During Infancy - United States, 1989-1998

This report summarizes the results of an analysis of death certificate data, which indicated that risk for infant homicide is greatest on the day of birth. Among homicides on the first day of life, 95% of the victims are not born in a hospital. Among homicides during the first week of life, 89% of known perpetrators are female, usually the mother. Mothers who kill their infants are more likely to be adolescents and have a history of mental illness. Homicide is the 15th leading cause of death during the first year of life (i.e., infancy) in the United States. In addition, the risk for homicide is greater in infancy than in any other year of childhood before age 17 years and is greatest during the first 4 months of life. Efforts to prevent infant homicides should focus on early infancy.

Fact Sheet - <http://www.cdc.gov/od/oc/media/pressrel/fs020308.htm>

Text version - <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5109a3.htm>

PDF version (p. 187) - <http://www.cdc.gov/mmwr/PDF/wk/mm5109.pdf>

#### 10. Changes in STD Rates in U.S. Cities

Summary data, is provided for gonorrhea, syphilis, chlamydia, and human papillomavirus (HPV-16), and the increases and decreases in disease rates seen in various U.S. cities.

Press Release - <http://www.cdc.gov/std/media/2002ConfTrends.htm>

#### 11. Mammography Screening

Provides links to the statement from the Department of Health and Human Services on screening, and the U.S. Preventive Services Task Force recommendations on screening for breast cancer.

HHS Web site (English) -

<http://www.hhs.gov/news/press/2002pres/20020221.html>

HHS Web site (Spanish) -

<http://www.hhs.gov/news/press/2002pres/20020221sp.html>

USPSTF Web site - <http://www.ahcpr.gov/clinic/3rduspstf/breastcancer/>

#### 12. Women and Diabetes Web Updates

This page has been updated and includes the fact sheet, report, MMWR article, press release, and the 10-minute radio broadcast and transcript on diabetes and women.

<http://www.cdc.gov/diabetes/projects/women.htm>

#### 13. Prenatal Smoking Databook

A tool for state-by-state analysis of data on smoking during pregnancy. National data are included in separate tables for comparison purposes. Information by state includes 36-38 data elements printed on a 2-page spread.

[http://www.cdc.gov/nccdphp/cdnr/cdnr\\_fall0114.htm](http://www.cdc.gov/nccdphp/cdnr/cdnr_fall0114.htm)

#### 14. Preventing and Controlling Cancer: Addressing the Nation's Second

#### Leading Cause of Death. At A Glance 2002

This At-A-Glance includes information on the burden of cancer, CDC's role and related programs, a state pilot program profile, and future directions.

Text version - <http://www.cdc.gov/cancer/dcpcaag.htm>

PDF version - <http://www.cdc.gov/cancer/dcp/pdf/DCPC-AAG-2002.pdf>

#### 15. Health-Related Quality of Life-Puerto Rico, 1996-2000

To determine the health-related quality of life (HRQOL) of adults living in Puerto Rico, during 1996-2000, as part of the Behavioral Risk Factor Surveillance System (BRFSS), interviews were conducted in Spanish with a representative sample of Puerto Rican adults. Older women, persons with less education or lower income, persons unable to work, and those who were overweight or who had diabetes or high blood pressure reported more days for which they were physically or mentally unhealthy during the 30 days preceding the survey. Men aged 18-44 years living in the island's metropolitan or eastern regions reported the fewest (2.9) unhealthy days, and women aged >65 years living in the northern region reported the most (9.8) unhealthy days. By educational attainment, mean unhealthy days ranged from 2.7 days for men aged 18-44 years with a high school education to 9.5 days for women aged >65 years who did not complete high school. By household income, the lowest mean for unhealthy days was 1.9 days for men aged 18-44 years with household incomes of \$35,000-\$49,999; the highest mean for unhealthy days was 9.4 days for women aged >65 years with incomes <\$15,000 per year. By employment status, the lowest mean (1.7 days) was for self-employed men aged >65 years, and the highest (16.1 days) was for women aged 45-64 years who were unable to work.

Fact Sheet - <http://www.cdc.gov/od/oc/media/pressrel/fs020228.htm>

Text version - <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5108a3.htm>

PDF version (p. 166) - <http://www.cdc.gov/mmwr/PDF/wk/mm5108.pdf>

#### 16. Preventing Heart Disease and Stroke: Addressing the Nation's Leading Killers, At A Glance 2002

This At-A-Glance includes information on the burden of disease, establishing a nationwide prevention program, highlights of two state programs, and the role of surveillance.

Text version - <http://www.cdc.gov/nccdphp/cvd/cvdaag.htm>

PDF version - <http://www.cdc.gov/nccdphp/cvd/cvdaag.pdf>

#### UPCOMING CDC CONFERENCES

##### 17. 2002 CDC Diabetes Translation Conference, May 6-9, St. Louis, MO

The CDC Diabetes Translation Conference 2002 will bring together a wide constituency of local, state, federal, and territorial governmental agencies, and private-sector diabetes partners. We will explore science, policy, education, and program planning and implementation and evaluation

issues that will help eliminate the preventable burden of diabetes.

<http://www.cdc.gov/diabetes/conferences/index.htm#2002>

18. 2002 National Sexual Violence Prevention Conference: Research and Practice in Sexual Violence Prevention: Enhancing the Dialogue, May 28-31, Chicago, IL

The theme, "Research and Practice in Sexual Violence Prevention: Enhancing the Dialogue" aptly describes conference goals to: forge working partnerships between researchers, practitioners, advocates, and survivors; increase understanding of issues on sexual assault; bring together representatives from the public and private sector; and provide a broad focus of expertise on programs, direct services, surveillance, research and evaluation.

<http://weblink.cdc.gov/ncipc/dvp/fivp/2002nsvp.htm>

19. The Public's Health and the Law in the 21st Century, June 18-19, Atlanta, GA

The conference will be held at the Sheraton Colony Square Hotel, 188 14th Street, NE, Atlanta, Georgia, 30361. The purpose of the conference is to improve the understanding and use of law as a vital tool to advance the public's health in the 21st century.

<http://www.phppo.cdc.gov/phlawnet/conference/>

20. First National Conference of the National Center on Birth Defects and Developmental Disabilities, September 17-19, 2002, Atlanta, GA.

The theme for the conference is "Honoring the Past and Framing the Future."

<http://www.cdc.gov/ncbddd/conference.htm>

21. CDC/ATSDR Women's Health Conference, October 7-9, 2002, Marriott Marquis Hotel, Atlanta, GA. Save the date!!

## HEALTH OBSERVANCES/CAMPAIGNS

22. Sexual Assault Awareness Month

April is dedicated to raising awareness of sexual assault as a significant social problem. The National Sexual Violence Resource Center is conducting a nationwide contest for an effective anti-sexual violence slogan, phrase, or theme that will be used for future Sexual Assault Awareness Month Campaigns. For more information about Sexual Assault Awareness Month and the slogan contest please see the NSVRC website (<http://www.nsvrc.org>) or telephone them at 877-739-3895.

23. Kick Butts Day, April 3

This annual event focuses on encouraging kids to stand up to tobacco and let their voices be heard. Kick Butts Day has become an important day for kids



everywhere to get involved with the fight against tobacco.

[http://www.cdc.gov/tobacco/tips\\_4\\_youth/kickbuttsday02.htm](http://www.cdc.gov/tobacco/tips_4_youth/kickbuttsday02.htm)

#### 24. World Health Day, April 7

April 7th of each year is designated as World Health Day and celebrated by the 191 member countries of the World Health Organization to emphasize significant issues in public health of worldwide concern. World Health Day offers a unique opportunity to raise global awareness of a specific health theme. The theme for World Health Day 2002 (WHD) "Move for Health!" highlights the importance of physical activity and a healthy life style. The day serves as a launch for a long-term advocacy program for which activities will be undertaken and resources provided well beyond April 7th.

<http://www.cdc.gov/nccdphp/dnpa/worldhealth/index.htm>

#### 25. National Women's Health Week, May 12-18, 2002

National Women's Health Week is a national effort to raise awareness about manageable steps women can take to improve their health. The focus is on the importance of incorporating simple health behaviors into everyday life.

NWHIC Web site - <http://www.4women.gov/WHW/index.htm>

#### 26. Changing Face of Women's Health Exhibit

The Changing Face of Women's Health exhibit is the first national exhibit dedicated to women's health. This traveling exhibit presents a sampling of many critical health issues facing women today. The exhibit touches on issues women experience at every stage of life. The exhibit is at the Museum of Science in Boston, MA from February to April 2002. National sponsors for the exhibit include CDC, the National Institutes of Health, Metropolitan Life Foundation and Pfizer Women's Health.

Women's Health Project Web site - <http://www.whealth.org/exhibit/>

### CDC SPONSORED TRAINING/CONTINUING EDUCATION

#### 27. Epidemic Intelligence Service

The Epidemic Intelligence Service (EIS) is a unique two-year, post-graduate program of service and on-the-job training for health professionals interested in the practice of epidemiology. Since 1951, over 2,000 EIS Officers have responded to requests for epidemiologic assistance within the United States and throughout the world. Every year, CDC's Epidemiology Program Office selects 60-80 persons from among the nation's top health professionals to enter the EIS and pursue on-the-job training in applied epidemiologic skills--skills vital to maintenance of public health. EIS Officers continue to play a major role in the implementation of CDC's mission of preventing disease and injury and promoting healthy lifestyles. Application deadline: September 15.

<http://www.cdc.gov/epo/dapht/eis/index.htm>



28. Revised Recommendations for HIV Screening of Pregnant Women, April 25, 1:00-3:00 pm, ET

This broadcast will discuss Revised Recommendations for HIV Screening of Pregnant Women-published November 9, 2001 in CDC's Morbidity and Mortality Weekly Report Recommendations and Reports series. The agenda includes the key recommendations, revisions from previous guidelines, implementation issues, resources and recommended reading. Viewers may fax in questions before and during the broadcast.

<http://www.cdcnpin.org/broadcast/current/2002/0425/start.htm>

PDF fact sheet - <http://www.phppo.cdc.gov/phtn/hivfs2002.pdf>

Registering a site - <http://www.phppo.cdc.gov/phtn/hivreg2002.pdf>

29. Effective Behavioral Interventions for HIV/STD Prevention, May 23, 2:00-4:00 pm ET

CDC is airing a live satellite broadcast featuring four behavioral interventions: Popular Opinion Leader (POL), VOICES/VOCES, Mpowerment, and Community PROMISE. Viewers will hear from researchers on the core elements of each intervention. The broadcast will feature programs from around the country implementing the interventions in minority communities. Viewers will also receive information on how they can sign up for training and technical assistance for these interventions.

<http://www.effectiveinterventions.org/>

30. Notice to Readers: Availability of Continuing Education CD-ROM Program on Strategies to Increase Adult Vaccination Rates

The Association of Teachers of Preventive Medicine and the CDC National Immunization Program have released "Increasing Adult Vaccination Rates: WhatWorks," an interactive instructional program on CD-ROM that offers primary-care providers strategies to increase vaccination rates among their adult patients. WhatWorks is free of charge and is approved for 2 hours of Continuing Medical Education credit, 2.3 hours Continuing Nursing Education credit, and 0.2 hours Continuing Education units through CDC.

Text version - <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5109a7.htm>

PDF version (p. 191)- <http://www.cdc.gov/mmwr/PDF/wk/mm5109.pdf>

31. Monthly Maternal-Child Health Presentations Broadcasted Live on the Web  
Every month the CDC MCH Epidemiology State Assignees meet via conference call to discuss current issues and activities in their states. The next broadcast will be in Wednesday, April 3. For approximately 45 minutes to 1 hour at the beginning of each meeting, a guest speaker presents on a timely issue pertinent to MCH epidemiology. These presentations are made available live on the Internet and are archived for later use. The broadcasts are sponsored by CDC and produced by the University of Illinois School of Public Health.

University of Illinois Web site -

<http://www.uic.edu/sph/cade/mchepi/meetings/>

## GRANTS AND COOPERATIVE AGREEMENT ANNOUNCEMENTS

Below are summaries of selected CDC funding announcements. For more information about CDC Grants and Cooperative Agreements, visit <http://www.cdc.gov/od/pgo/funding/grantmain.htm>.

DISCLAIMER: The official source for announcements of grants and cooperative agreement opportunities is the Federal Register. The electronic version of these announcements is provided as a convenience. In the event of any conflict between the content of the electronic version and the Federal Register version, you should rely on the information in the Federal Register.

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### 32. Community-Based Participatory Prevention Research [Program Announcement 02003]

The purpose of the program is to stimulate investigator-initiated participatory research on community-based approaches to prevention. Findings from these projects should advance the practice of public health and policy in order to promote health and reduce disease, disability, and injury. Specifically, this announcement seeks to support multi-disciplinary, multi-level, participatory research that will enhance the capacity of communities and population groups to address health promotion and the prevention of disease, disability and injury. Applications may be submitted by public and private nonprofit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, State and local governments or their bona fide agents, including the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau, federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations. Additional applicant requirements apply. Approximately \$13,000,000 is available in FY 2002 to fund approximately 30 awards. It is expected that the average award will be \$450,000, ranging from \$400,000 to \$500,000. A non-binding LOI is requested for this program, on or before March 20, 2002. Application deadline: April 30, 2002.

<http://www.cdc.gov/od/pgo/funding/02003.htm>

### 33. Integrated, Multi-level Interventions to Improve Adolescent Health through the Prevention of Sexually Transmitted Diseases, Including HIV, and Teen Pregnancy [Program Announcement 02008]

The goal of this cooperative agreement research program is to develop, implement and evaluate interventions to prevent STD, including HIV, and

pregnancy among adolescents. These interventions should be multi-level and should be integrated, interactive, and synergistic. The goal of this research program is to take a developmental approach to delivering multi-level interventions, that change over time to be age appropriate. Applications may be submitted by public and private nonprofit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, State and local governments or their bona fide agents, including the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, the Commonwealth of Northern Mariana Islands, American Samoa, Guam, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau, and federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations. Approximately \$1,000,000 is available in FY 2002 to fund up to three awards. A letter of intent (LOI) is requested and appreciated but is not required for this program. On or before March 1, 2002, submit the LOI. Application Deadline: June 1, 2002.

<http://www.cdc.gov/od/pgo/funding/02008.htm>

#### 34. Public Health Conference Support Cooperative Agreement Program for HIV Prevention [Program Announcement 01025]

CDC announces the availability of funds for a cooperative agreement program for Public Health Conference Support for Human Immunodeficiency Virus (HIV) Prevention. Applications may be submitted by public and private nonprofit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, local governments or their bona fide agents, and federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations. State and local health departments may apply for funding only under Category 2 (See E. Application Content). Approximately \$200,000 is available in FY 2002 to fund approximately 10 to 15 awards. Awards may range from \$10,000 to \$25,000. Letter of Intent Due Date: Cycle IV: July 19, 2002-for conferences January 1-June 30, 2003.

<http://www.cdc.gov/od/pgo/funding/01025.htm>

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CDC's mission is to promote health and quality of life by preventing and controlling disease, injury, and disability.

The mission of ATSDR is to prevent exposure and adverse human health effects and diminished quality of life associated with exposure to hazardous

substances from waste sites, unplanned releases, and other sources of pollution present in the environment.